



## New Jersey Department of Children and Families Policy Manual

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Volume:	IX	Administrative	
Chapter:	F	Fiscal	3-23-94
Subchapter:	1	General Fiscal	
Issuance:	900	<b>Employee Claims for Loss or Damage to Personal Property</b>	

### Scope

**3-23-94**

The policy and procedures in this section are applicable to employee claims for loss or damage to personal property which do not exceed \$1000. Any claim exceeding \$1000 per individual claim is processed by the Department of the Treasury, after it has been reviewed and forwarded to the Department of the Treasury by the DCF Office of Accounting.

### Policy

**3-23-94**

Employees may be reimbursed for property loss or damage which occurs in the line of duty. An employee claim is processed through the Office of Accounting on the DCF Form [86-3](#), Employee Claim for Loss or Damage to Property.

Employees are expected to exercise reasonable care to prevent property loss or damage. For example, it is not considered "reasonable" for an employee to leave property in an empty, unlocked state car; or for an employee to wear expensive clothing or jewelry to work with clients/patients whose behavior is unpredictable. Items of personal property, with the exception of eyeglasses, will be depreciated in value over the course of their ownership.

The Chief, Office of Accounting, determines whether a reasonable percentage of depreciation has been applied in a claim for a lost or damaged item. In the case of loss or damage to eyeglasses, 100% of their original value is allowed up to a maximum of \$350.00. Within the limits of the \$350.00 maximum reimbursement, a maximum of \$275.00 may be reimbursed for lenses and a maximum of \$100.00 may be reimbursed for frames. Legal responsibility for employee personal property on state property is limited to those eventualities which are the consequences of negligent acts or omissions by the Department.

All applicable first-party insurance sources, (e.g., comprehensive automobile insurance, homeowner's insurance) are to be used before submission of a claim to the state. Refer to the Claim for Loss or Damage to Employee Property, Form DCF Form [86-3](#), item 13.

**Procedures for Submitting a Claim****3-23-94**

RESPONSIBILITY	ACTION REQUIRED
CP&P Employee	1. Attempt to secure the names and cooperation of any witnesses to the incident of loss or damage to personal property.
	2. Report the incident at once to an immediate supervisor and ask the supervisor to examine the damaged item.
	3. Complete the Claim for Loss or Damage to Employee Property, Form DCF Form <a href="#">86-3</a> , (typed or legibly printed) within 30 calendar days of the incident. All line items must be completed, including lines 13, 13a and 13b.
	4. Prepare an original State of New Jersey Payment Voucher (PV 6/93) completing the name, address and Federal Identification number portion of the document. Sign in the "Payee Signature" area of the form. Note: This form will not be processed if claim is rejected at any point in the approval process.
CP&P Employee/Witnesses	5. Sign the DCF Form <a href="#">86-3</a> Form, Attachment A.
Employee's Immediate Supervisor	6. Review form and sign to certify to the claimed loss or damage.
	7. Forward DCF Form <a href="#">86-3</a> with pertinent purchase, repair receipts or estimates and the signed PV 6/93 to the Area Business Manager, or to the Coordinator, Office of Accounting, if the employee is in Central Office.
Area Business Manager/Coordinator, Office of Accounting	
	8. Review form for completeness, accuracy and reasonableness.

	<p>9. Complete and sign a Statement Supporting an Employee Claim for Loss or Damage to Property, Form DCF Form <a href="#">86-3</a>, Attachment B. Sign the original State of New Jersey Payment Voucher, PV 6/93 if the claim is acceptable, in the area titled "Certification by Receiving Agency."</p>
	<p>10. Check the appropriations Handbook for the Public Law citation for current appropriations and on the PV 6/93 add the following, "Recommended for payment in accordance with P.L. _____, Chapter _____, Section _____. Insert the correct Public Law citation.</p>
	<p>11. Forward the Form DCF 86-3, Attachments A and B, original State of New Jersey Payment Voucher, PV 6/93 and receipts or estimates to:</p> <p style="padding-left: 40px;">Chief, DCF Office of Accounting 50 E. State Street CN 717 (cc: 973) Trenton, NJ 08625</p>
Chief, Office of Accounting	<p>12. Review claim and supporting documentation for completeness, accuracy and compliance with Departmental Budget, Finance and Administration Circular Letter 86-3.</p>
	<p>13. Return the package to the appropriate Area Business Manager with a written explanation for rejection or instructions for completing, if the claim is incomplete or non-compliant.</p>

Area Business Manager/ Coordinator, Office of Accounting	14. Follow the steps indicated for completion and return the package to the Chief, Office of Accounting, for claim processing.
Chief, Office of Accounting	15. Sign the PV 6/93 in the lower right hand corner, if the claim is complete and in compliance with Form DCF Form <a href="#">86-3</a> .
	16. Process the required NJCFS documentation for the Department.
	17. Retain one copy of claim and documentation and send original to:  Director DCF Office of Business and Procurement (OBP) Capital Place One CN 700 222 South Warren Street Trenton, New Jersey
Director	18. Review the material and DCF Office of Business and approve or reject the claim based on the information presented in the claim form and supporting documentation. Note: Incomplete claims will be returned if necessary information is not provided.
	19. Forward approved claim and all material to the Department of Treasury for approval and payment.
	20. Return rejected claim and all material to the Chief, Office of Accounting with a written explanation of the reason for rejection.